

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		20	2/10
FORMALITY REVIEW	LCK	1034	3-9-01
RESPONSE FORMALITY REVIEW	TV	876	05/09/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	2/10
2	✓	✓	2/10
3	✓	✓	2/10
4	✓	✓	2/10
5	0	0	2/10
6	0	0	2/10
7	0	0	2/10
8	✓	✓	2/10
9	0	0	2/10
10	0	0	2/10
11	0	0	2/10
12	✓	✓	2/10
13	✓	✓	2/10
14	✓	✓	2/10
15	✓	✓	2/10
16	✓	✓	2/10
17	0	0	2/10
18	0	0	2/10
19	0	0	2/10
20	✓	✓	2/10
21	0	0	2/10
22	0	0	2/10
23	0	0	2/10
24	✓	✓	2/10
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If more than 150 claims or 10 actions  
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